DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AS (SEMIAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: FIELDCREST MANOR (410217)

Address: 1510 S 30TH ST, MANITOWOC, WI 54220

License Status: REGULAR

Licensed/Certified/Registered 11/01/1990

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0094734 End Date: 02/01/2005 Type: OTHER Purpose: OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093105 End Date: 07/27/2004 Type: ABBREVIATED Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007002 Served 08/13/2004

Deficiencies Cited Subject Area <u>Compliance</u>

Verified Corrected

83.13(4)(a) COMMUNICABLE DISEASE CONTROL

83.17(3)(a)1 HOLDING RESIDENT FUNDS-MORE THAN \$200

Survey ID: 0092327 End Date: 03/26/2004 Type: OTHER Purpose: OTHER

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.